

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 249

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Massa for Congress

A.

Full Name (Last, First, Middle Initial)

Robert Linton

Mailing Address 985 5th Ave

City

New York

State

NY

Zip Code

10075-0142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Executive

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	9	

Transaction ID: C5624395A

Amount of Each Receipt this Period

2400.00

* Earmarked Contribution:
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57563.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	2	/	2	0	9	

Transaction ID: C5624395AB

Amount of Each Receipt this Period

2400.00

[MEMO ITEM]Note: Above Contribution
earmarked through this or-
ganization.**C.**

Full Name (Last, First, Middle Initial)

Karl Marchenese

Mailing Address 4395 Chosen Spot Dr

City

Canandaigua

State

NY

Zip Code

14424-8229

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Eye Care Center

Occupation

physician

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	9	

Transaction ID: C5608983A

Amount of Each Receipt this Period

500.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)